

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing

Small PHA Plan Update  
Annual Plan for Fiscal Year:

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN  
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

**PHA Plan**

## Agency Identification

**PHA Name: Low Rent Housing Agency Red Oak**

**PHA Number: IA044**

**PHA Fiscal Year Beginning: 10-01-2001**

### **PHA Plan Contact Information:**

Name: Karon Millikan, Executive Director

Phone: 712 623-4558

TDD:

Email acorna@redoak.heartland.net

### **Public Access to Information**

**Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)**

- X Main administrative office of the PHA
- PHA development management offices

### **Display Locations For PHA Plans and Supporting Documents**

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

Main administrative office of the PHA

- X PHA development management offices
- Main administrative office of the local, county or State government
- Public library
- PHA website
- Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- X Main business office of the PHA
- PHA development management offices
- Other (list below)

### **PHA Programs Administered:**

Public Housing and Section 8      Section 8 Only      X Public Housing Only

## **Annual PHA Plan**

### **Fiscal Year 20**

[24 CFR Part 903.7]

#### **i. Table of Contents**

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **separate** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

#### **Contents**Page #

##### **Annual Plan**

.Executive Summary (optional)

.Annual Plan Information

.Table of Contents

.Capital Improvement Needs

.Other Information:

. Resident Advisory Board Consultation Process

. Statement of Consistency with Consolidated Plan

. Criteria for Substantial Deviations and Significant Amendments

##### **Attachments**

Attachment A : Supporting Documents Available for Review

Attachment \_\_: Capital Fund Program Annual Statement

Attachment \_\_: Capital Fund Program 5 Year Action Plan

Attachment \_\_: Capital Fund Program Replacement Housing  
Factor Annual Statement

Attachment IA044b02 : Resident Membership on PHA Board or Governing  
Body

Attachment IA044c02: Membership of Resident Advisory Board or Boards

Attachment \_\_\_\_\_: Comments of Resident Advisory Board or  
Boards & Explanation of PHA Response  
(must be attached if not included in PHA  
Plan text)

Other (List below, providing each attachment name)

## **ii. Executive Summary**

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

### **1. Summary of Policy or Program Changes for the Upcoming Year**

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

**None**

### **2. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. X Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 72,683.00

C. X Yes Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

#### **(1) Capital Fund Program 5-Year Action Plan**

The Capital Fund Program 5-Year Action Plan is provided as Attachment

#### **(2) Capital Fund Program Annual Statement**

The Capital Fund Program Annual Statement is provided as Attachment

### **3. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. No X: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component ; if "yes", complete one activity description for each development.)

## 2. Activity Description

### **Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)**

- 1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition Disposition
3. Application status (select one) Approved Submitted, pending approval Planned application
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected: 6. Coverage of action (select one) Part of the development Total development
7. Relocation resources (select all that apply) Section 8 for units Public housing for units Preference for admission to other public housing or section 8 Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

## **4. Voucher Homeownership Program**

[24 CFR Part 903.7 9 (k)]

- A. No ☒ : Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

### **B. Capacity of the PHA to Administer a Section 8 Homeownership Program**

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources
- Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

## **5. Safety and Crime Prevention: PHDEP Plan**

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

. No ☒ : Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ \_\_\_\_\_

C. No ☒ Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D. No ☒ : The PHDEP Plan is attached at Attachment \_\_\_\_\_

## **6. Other Information**

[24 CFR Part 903.7 9 (r)]

### **A. Resident Advisory Board (RAB) Recommendations and PHA Response**

1. Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are Attached at Attachment (File name)

3. In what manner did the PHA address those comments? (select all that apply)

The PHA changed portions of the PHA Plan in response to comments

A list of these changes is included

Yes ☐ No: below or

Yes ☐ No: at the end of the RAB Comments in Attachment \_\_\_\_\_.

Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment \_\_\_\_\_.

Other: (list below)

### **B. Statement of Consistency with the Consolidated Plan**

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here)

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

X The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.  
The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.  
The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.  
Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)  
Other: (list below)

. PHA Requests for support from the Consolidated Plan Agency

No X : Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

**C. Criteria for Substantial Deviation and Significant Amendments**

**1.Amendment and Deviation Definitions**

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

**A. Substantial Deviation from the 5-year Plan:**

**B. Significant Amendment or Modification to the Annual Plan:**

## **Attachment A ia044a02**

### **Supporting Documents Available for Review**

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

### **List of Supporting Documents Available for Review**

<b>Applicable &amp; On Display Component</b>	<b>Supporting Documents</b>	<b>Related Plan</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual
Plans		
N/A	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Yr & Annual
Plans		
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Yr & Annual
Plans		
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan:
Eligibility, Selection, and Admissions Policies		
X	Any policy governing occupancy of Police Officers in Public Housing X check here if included in the public housing A&O Policy	Annual Plan: Eligibility,  and Admissions Policies
Selection,		
N/A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection,



		and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
N/A	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent
Determination X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and
Maintenance		
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and
Operations N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance Community Service & Self-
and Sufficiency		
N/A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any required policies governing any Section 8 special housing types check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures X check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
N/A	Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan	Annual Plan: Grievance
Procedures X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs

X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and
Disposition		
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public
Housing N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public
Housing N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan	Annual Plan: Homeownership
N/A	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-

Sufficiency N/A	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime
Prevention N/A	<p>PHDEP-related documentation:</p> <ul style="list-style-type: none"> <li>Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);</li> <li>Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>Coordination with other law enforcement efforts;</li> <li>Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.</li> </ul>	Annual Plan: Safety and Crime
Prevention X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) X check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
necessary)	Other supporting documents (optional) (list individually; use as many lines as (specify as needed)	

## Annual Statement/Performance and Evaluation Report Capital Fund

# **Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: Red Oak Housing Authority

Grant Type and Number

Capital Fund Program: X

Replacement Housing Factor Grant No: IA05P04450101

Federal FY of Grant: 20

Original Annual Statement X

Reserve for Disasters/

Emergencies Revised Annual Statement (revision no: ) Performance and Evaluation Report for

Period Ending: Final Performance and Evaluation Report

Line No. Summary by Development Account

Total Estimated Cost

Revised

Total Actual Cost

Original

Exp

1	Total non-CFP Funds	
2	1406 Operations	
3	1408 Management Improvements	
4	1410 Administration	
5	1411 Audit	
6	1415 liquidated Damages	
7	1430 Fees and Costs	7,500
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	
11	1465.1 Dwelling Equipment-Nonexpendable	65,183
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	Amount of Annual Grant: (sum of lines 2-19)	72,683
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

**Annual Statement/Performance and Evaluation Report Capital Fund  
Program and Capital Fund Program Replacement Housing Factor  
(CFP/CFPRHF) Part II: Supporting Pages**

PHA Name: Red Oak Housing Authority

Grant Type and Number Capital Fund

Program #: Capital Fund Program X Replacement Housing Factor #: IA05P04450101

Federal FY of Grant: 2

Development Number IA044 General Description of Major Work Categories A/E

Dev. Acct No. 1430

Total Estimated Cost Original \$7,500 Revised

Total Actual Cost Funds Obligated 00 Funds Expended 00

\*\*\*\*\*

IA044 Dev. Acct No.: 1465.1 General Description of Work: Air Conditioners

Total Estimated Cost Original \$62,183

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

PHA Name: Red Oak Housing Authority Grant Type and Number Capital Fund Program #: X

Capital Fund Program Replacement Housing Factor #: IA05P04450101

Federal FY of Grant: 2

Development Number Name/HA-Wide Activities IA044

All Fund Obligated (Quart Ending Date)03-03-2002

All Funds Expended (Quarter Ending Date) 12-30-2002

Reasons for Revised Target Dates

Original	Revised	Actual	Original	Revised	Actual
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## Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

**CFP 5-Year Action Plan** Original statement X Revised statement  
Development Number Development Name (or indicate PHA wide) IA044

Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Redo Driveways/Parking/Sidewalks	\$72,683	2003
Vinyl&Carpeting	\$72,683	2004

<b>Replace Bathroom Stools/Cabinets</b>	<b>\$72,683</b>	<b>2005</b>
<b>Equipment Update Office/Maintenance</b>	<b>\$72,683</b>	<b>2006</b>
<b>Kitchen Window/Sidewalks</b>	<b>\$72,683</b>	<b>2007</b>
<b>Total estimated cost over next 5 years</b>	<b>\$363,415</b>	

# PHA Public Housing Drug Elimination Program Plan

**Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.**

## **Section 1: General Information/History**

**A. Amount of PHDEP Grant \$** \_\_\_\_\_

**B. Eligibility type (Indicate with an "x")** N1 \_\_\_\_\_ N2 \_\_\_\_\_ R \_\_\_\_\_

**C. FFY in which funding is requested** \_\_\_\_\_

### **D. Executive Summary of Annual PHDEP Plan**

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

### **E. Target Areas**

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

<b>PHDEP Target Areas (Name of development(s) or site)</b>	<b>Total # of Units within the PHDEP Target Area(s)</b>	<b>Total Population to be Served within the PHDEP Target Area(s)</b>
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### **F. Duration of Program**

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

**12 Months** \_\_\_\_\_ **18 Months** \_\_\_\_\_ **24 Months** \_\_\_\_\_

### **G. PHDEP Program History**

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place "GE" in column or "W" for waivers.

**Fiscal Year of Funding**  
**Date of this Submission**

**PHDEP Funding Received Grant #**  
**Grant Extensions or Waivers**

**Fund Balance as of**  
**Grant Start Date Grant Term End Date**

FY 1995  
FY 1996  
FY 1997  
FY1998



FY 1999

## **Section 2: PHDEP Plan Goals and Budget**

### **A. PHDEP Plan Summary**

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

### **B. PHDEP Budget Summary**

Enter the total amount of PHDEP funding allocated to each line item.

**FFY \_\_\_\_\_ PHDEP Budget Summary Original statement Revised statement dated:**

<b>Budget Line Item</b>	<b>Total Funding</b>
9110 - Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	

**TOTAL PHDEP FUNDING**

### **C. PHDEP Plan Goals and Activities**

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise-not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

<b>9110 - Reimbursement of Law Enforcement</b>	<b>Total</b>
<b>PHDEP Funding: \$</b>	
<b>Goal(s)</b>	
<b>Objectives</b>	

Proposed Activities	# of Persons Served	Target Population	Start Date
Funding (Amount/ Source)	Expected Complete Date	PHEDEP Funding	Other
1.	Performance Indicators		
2.			
3.			

### 9115 - Special Initiative

**Total**

**PHDEP Funding: \$**

Goal(s)

Objectives

Proposed Activities

# of Persons Served

Target Population

Start Date

Expected Complete Date

1.

2.

3.

### 9116 - Gun Buyback TA Match

**Total PHDEP**

**Funding: \$**

Goal(s)

Objectives

Proposed Activities

# of Persons Served  
Expected Complete Date  
Performance Indicators

Target Population  
PHDEP Funding

Start Date  
Other Funding

(Amount /Source)

1.

2.

3.

### 9120 - Security Personnel

**Total PHDEP**

**Funding: \$**

Goal(s)

Objectives

Proposed Activities

# of Persons Served

Target Population

Start Date

Expected Complete Date

1.

2.

3.

### 9130 - Employment of Investigators

**Total PHDEP**

**Funding: \$**

Goal(s)

Objectives

Proposed Activities

# of Persons Served

Target Population

Start Date

Expected Complete Date

- 1.
- 2.
- 3.

### 9140 - Voluntary Tenant Patrol

**Total PHDEP**

**Funding: \$**

Goal(s)

Objectives

Proposed Activities

# of Persons Served

Target Population

Start Date

Expected Complete Date

- 1.
- 2.
- 3.

### 9150 - Physical Improvements

**Total PHDEP**

**Funding: \$**

Goal(s)

Objectives

Proposed Activities

# of Persons Served

Target Population

Start Date

Expected Complete Date

- 1.
- 2.
- 3.

### 9160 - Drug Prevention

**Total**

**PHDEP Funding: \$**

Goal(s)

Objectives

Proposed Activities

# of Persons Served

Target Population

Start Date

Expected Complete Date

- 1.
- 2.
- 3.

### 9170 - Drug Intervention

**Total**

**PHDEP Funding: \$**

Goal(s)

Objectives

Proposed Activities

# of Persons Served

Target Population

Start Date

Expected Complete Date

- 1.
- 2.
- 3.

### 9180 - Drug Treatment

**Total PHDEP**

**Funding: \$**

Goal(s)

Objectives

Proposed Activities

# of Persons Served  
Expected Complete Date  
Performance Indicators

Target Population  
PHEDEP Funding

Start Date  
Other Funding

(Amount /Source)

- 1.
- 2.
- 3.

**9190 - Other Program Costs**

**Total PHDEP**

**Funds: \$**

Goal(s)

Objectives

Proposed Activities

# of Persons Served

Target Population

Start Date

Expected Complete Date

- 1.
- 2.
- 3.

**Required Attachment ia044b02: Resident Member on the PHA  
Governing Board**

1. Yes X No:

Does the PHA governing board include at least one member who  
is directly assisted by the PHA this year? (if no, skip to #2)

A.Name of resident member(s) on the governing board:

Evelyn Daugherty

B.How was the resident board member selected: (select one)?

Elected

Appointed X

C. The term of appointment is (include the date term expires):

March 2000-Jan 2002

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

Other (explain):

B. Date of next term expiration of a governing board member:

C.Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

**Required Attachment ia044c02: Membership of the Resident Advisory Board or Boards**

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Meeting held on May 1, 2001 at Resident Council Meeting

Those present were Judy Updegrove, Lyda Larson, Vivian Ellis, Dorothy Beam, Betty Flaten, Gayle Swanson and Darold Stoddard..

Since Acorn Acres has a resident council now, we chose to use this group as our resident advisory board this year.

The group had no comments to submit.

## **Attachment A ia044a02**

### **Supporting Documents Available for Review**

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Documents</b>	<b>Related Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
N/A	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Yr & Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Yr & Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions
X	Any policy governing occupancy of Police Officers in Public Housing X check here if included in the public housing A&O Policy	Policies  Annual Plan: Eligibility, Selection, and Admissions  Policies
N/A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions
X	Public housing rent determination policies, including the method for setting public housing flat rents X check here if included in the public	Policies

	housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
N/A	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
N/A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any required policies governing any Section 8 special housing types check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures X check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
N/A	Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with	



	Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
N/A	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
N/A	PHDEP-related documentation: · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; ·	

	Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) X check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit Troubled PHAs
N/A	Troubled PHAs: MOA/Recovery Plan	
	Other supporting documents (optional) (list individually; use as many lines as necessary) (specify as needed)	

## Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: Red Oak Housing Authority		Grant Type and Number	
Capital Fund Program: X	Replacement Housing Factor Grant No: IA05P04450101	Federal	
FY of Grant: 2001			
Original Annual Statement X		Reserve for Disasters/ Emergencies	
Revised Annual Statement (revision no: )		Performance and Evaluation Report for Period Ending:	
Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost	Total
	Actual Cost		
	Obligated	Original Expended	Revised
1	Total non-CFP Funds		
2	1406 Operations		
3	1408 Management Improvements		
4	1410 Administration		
5	1411 Audit		

6	1415 liquidated Damages	
7	1430 Fees and Costs	7,500
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	
11	1465.1 Dwelling Equipment-Nonexpendable	65,183
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	Amount of Annual Grant: (sum of lines 2-19)	72,683
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

**Annual Statement/Performance and Evaluation Report Capital Fund  
Program and Capital Fund Program Replacement Housing Factor  
(CFP/CFPRHF) Part II: Supporting Pages**

PHA Name: Red Oak Housing Authority

Grant Type and Number Capital Fund Program #:

Capital Fund Program X Replacement Housing Factor #: IA05P04450101

**Federal**

**FY of Grant: 2001**

Development Number

General Description of Major Work Categories

IA044

A/E

Dev. Acct No.

1430

Total Estimated Cost Original \$7,500

Revised

Total Actual Cost

Funds Obligated 00

Funds Expended 00

\*\*\*\*\*

IA044

Dev. Acct No.: 1465.1

General Description of Work:

Air Conditioners

Total Estimated Cost

Original \$62,183

# **Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule**

PHA Name: Red Oak Housing Authority      **Grant Type and Number**      Capital Fund Program #: ☒      Capital  
Fund Program Replacement Housing Factor #: IA05P04450101      **Federal**  
**FY of Grant:** 2001  
Development Number Name/HA-Wide Activities IA044

All Fund Obligated (Quart Ending Date) 03-03-2002

All Funds Expended (Quarter Ending Date) 12-30-2002

Reasons for Revised Target Dates

Original	Revised	Actual	Original	Revised	Actual
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## **Capital Fund Program 5-Year Action Plan**

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

**CFP 5-Year Action Plan**    Original statement    ☒ Revised statement  
**Development Number**    **Development Name (or indicate PHA wide)**    IA044

<b>Description of Needed Physical Improvements or Management Improvements</b>	<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
Redo Driveways/Parking/Sidewalks	\$72,683	2003
Vinyl&Carpeting	\$72,683	2004
Replace Bathroom Stools/Cabinets	\$72,683	2005

<b>Equipment Update Office/Maintenance</b>	<b>\$72,683</b>	<b>2006</b>
--	-----------------	-------------

<b>Kitchen Window/Sidewalks</b>	<b>\$72,683</b>	<b>2007</b>
---------------------------------	-----------------	-------------

<b>Total estimated cost over next 5 years</b>	<b>\$363,415</b>	
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# PHA Public Housing Drug Elimination Program Plan

**Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.**

## **Section 1: General Information/History**

**A. Amount of PHDEP Grant \$** \_\_\_\_\_

**B. Eligibility type (Indicate with an "x")** N1 \_\_\_\_\_ N2 \_\_\_\_\_ R \_\_\_\_\_

**C. FFY in which funding is requested** \_\_\_\_\_

### **D. Executive Summary of Annual PHDEP Plan**

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

### **E. Target Areas**

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)
---	--	---

### **F. Duration of Program**

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

12 Months \_\_\_\_\_ 18 Months \_\_\_\_\_ 24 Months \_\_\_\_\_

### **G. PHDEP Program History**

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding this Submission	PHDEP Funding Received Grant Extensions or Waivers	Grant # Grant Start Date	Fund Balance as of Date of Grant Term End Date
FY 1995			
FY 1996			
FY 1997			
FY1998			
FY 1999			

## **Section 2: PHDEP Plan Goals and Budget**

### **A. PHDEP Plan Summary**

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

### **B. PHDEP Budget Summary**

Enter the total amount of PHDEP funding allocated to each line item.

**FFY \_\_\_\_\_ PHDEP Budget Summary Original statement Revised statement dated:**

<b>Budget Line Item</b>	<b>Total Funding</b>
-------------------------	----------------------

9110 - Reimbursement of Law Enforcement	
---	--

9115 - Special Initiative	
---------------------------	--

9116 - Gun Buyback TA Match	
-----------------------------	--

9120 - Security Personnel	
---------------------------	--

9130 - Employment of Investigators	
------------------------------------	--

9140 - Voluntary Tenant Patrol	
--------------------------------	--

9150 - Physical Improvements	
------------------------------	--

9160 - Drug Prevention	
------------------------	--

9170 - Drug Intervention	
--------------------------	--

9180 - Drug Treatment	
-----------------------	--

9190 - Other Program Costs	
----------------------------	--

**TOTAL PHDEP FUNDING**

### **C. PHDEP Plan Goals and Activities**

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise-not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

#### **9110 - Reimbursement of Law Enforcement**

**Total PHDEP**

**Funding: \$**

**Goal(s)**

**Objectives**

**Proposed Activities**

**Complete Date**

**# of Persons Served  
PHEDEP Funding  
Performance Indicators**

**Target Population    Start Date    Expected  
Other Funding (Amount/ Source)**

1.

2.



3.

### 9115 - Special Initiative

**Total PHDEP**

**Funding: \$**

Goal(s)

Objectives

Proposed Activities

Complete Date

# of Persons Served  
PHEDEP Funding  
Performance Indicators

Target Population      Start Date      Expected  
Other Funding (Amount/ Source)

1.

2.

3.

### 9116 - Gun Buyback TA Match

**Total PHDEP Funding: \$**

Goal(s)

Objectives

Proposed Activities

Complete Date

Indicators

# of Persons Served  
PHEDEP Funding

Target Population      Start Date      Expected  
Other Funding (Amount /Source)      Performance

1.

2.

3.

### 9120 - Security Personnel

**Total PHDEP Funding: \$**

Goal(s)

Objectives

Proposed Activities

Complete Date

# of Persons Served  
PHEDEP Funding  
Performance Indicators

Target Population      Start Date      Expected  
Other Funding (Amount /Source)

1.

2.

3.

### 9130 - Employment of Investigators

**Total PHDEP Funding:**

**\$**

Goal(s)

Objectives

Proposed Activities

Complete Date

# of Persons Served  
PHEDEP Funding  
Performance Indicators

Target Population      Start Date      Expected  
Other Funding (Amount /Source)

1.

- 2.
- 3.

## 9140 - Voluntary Tenant Patrol

**Total PHDEP Funding:**

\$

Goal(s)

Objectives

Proposed Activities

Complete Date

# of Persons Served

PHDEP Funding

Performance Indicators

Target Population

Start Date

Expected

Other Funding (Amount /Source)

- 1.
- 2.
- 3.

## 9150 - Physical Improvements

**Total PHDEP Funding:**

\$

Goal(s)

Objectives

Proposed Activities

Complete Date

# of Persons Served

PHDEP Funding

Performance Indicators

Target Population

Start Date

Expected

Other Funding (Amount /Source)

- 1.
- 2.
- 3.

## 9160 - Drug Prevention

**Total PHDEP**

**Funding: \$**

Goal(s)

Objectives

Proposed Activities

Complete Date

# of Persons Served

PHDEP Funding

Performance Indicators

Target Population

Start Date

Expected

Other Funding (Amount /Source)

- 1.
- 2.
- 3.

## 9170 - Drug Intervention

**Total PHDEP**

**Funding: \$**

Goal(s)

Objectives

Proposed Activities

Complete Date

# of Persons Served

PHDEP Funding

Performance Indicators

Target Population

Start Date

Expected

Other Funding (Amount /Source)

- 1.

- 2.
- 3.

## 9180 - Drug Treatment

**Total PHDEP Funding:**

\$

Goal(s)

Objectives

Proposed Activities

Complete Date

# of Persons Served  
PHDEP Funding  
Performance Indicators

Target Population  
Other Funding (Amount /Source)

Start Date

Expected

- 1.
- 2.
- 3.

## 9190 - Other Program Costs

**Total PHDEP Funds: \$**

Goal(s)

Objectives

Proposed Activities

Complete Date

# of Persons Served  
PHDEP Funding  
Performance Indicators

Target Population  
Other Funding (Amount /Source)

Start Date

Expected

- 1.
- 2.
- 3.

**Required Attachment ia044b02: Resident Member on the PHA Governing Board**

1. Yes ☒ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:  
Evelyn Daugherty

B. How was the resident board member selected: (select one)?  
Elected  
Appointed ☒

C. The term of appointment is (include the date term expires):  
March 2000-Jan 2002

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?  
the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis  
the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.  
Other (explain):

B. Date of next term expiration of a governing board member:

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

**Required Attachment ia044c02: Membership of the Resident Advisory Board or Boards**

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Meeting held on May 1, 2001 at Resident Council Meeting

Those present were Judy Updegrove, Lyda Larson, Vivian Ellis, Dorothy Beam, Betty Flaten, Gayle Swanson and Darold Stoddard..

Since Acorn Acres has a resident council now, we chose to use this group as our resident advisory board this year.

The group had no comments to submit.

**BY-LAWS  
Of  
Resident Council of Acorn Acres of Red Oak, Iowa**

**ARTICLE I - NAME**

The name of the organization is the Resident Council of Acorn Acres in Red Oak, Iowa..

**ARTICLE II - PURPOSE**

- A. Promoting and evaluating activities that contribute to the self-sufficiency of the residents.
- B. Providing leadership, support and information to Acorn Acres residents.
- C. Promoting the image of Acorn Acres residents in the community.
- D. Providing an opportunity for sharing of information among the residents.

**ARTICLE III - EXECUTIVE COMMITTEE**

A. GENERAL POWERS, TENURE, MEETINGS

The business and affairs of the Resident Council shall be managed by the Executive Committee which may exercise all powers required of the Council.

B. ADVISORY COUNCIL

The Advisory Council shall be selected by the Executive Committee. The purpose of the Advisory Council is to assist and support the activities of the Resident Council as requested. The Advisory Council shall report to the Acorn Acres Board any requests for help or needs or suggestions that are made by the residents that cannot be handled by the Executive Committee.

C. VACANCIES

Any vacancy occurring in the Executive Committee - for the reason of resignation of a member of that committee, removal of a member pursuant to Section D, below, or other reason for a vacancy - shall be filled by the next highest ranking elected officer of the committee or by appointment by the Executive Committee. Should none exist, the vacancy shall remain unfilled until officers are elected at the annual meeting. During the term of the vacancy, the number of Committee members shall be considered to be decreased by the number of vacating members.

D. REMOVAL; RESIGNATION

An official member shall be removed exclusively by the procedure herein after provided. Before any Committee member may be removed, written charges specifying the alleged sufficient causes which are detrimental to the best interest of the Resident Council shall be filed with the Secretary, and a copy thereof shall be served on the Committee member charged, and he/she shall be given the opportunity at a meeting of the Executive Committee to be heard on the subject of the chargers. At any meeting of the Executive Committee, duly called and at which there in a quorum, the affirmative vote of two-thirds

of all of the Executive Committee shall be necessary to effect such removal. Three (3) consecutive unexcused absences constitute removal from the Executive Committee.

Any Executive Committee member may resign at any time by giving written notice or witnessed oral notice to the Executive Committee, the President or the Secretary of the Executive Committee. Unless otherwise specified in such written notice, the resignation shall be effective upon delivery to the Executive Committee or the designated officer. Any actions of the Executive Committee must be reported to the Resident Council.

E. MINUTES

The Executive Committee shall keep regular minutes of its meetings. The President shall preside at the meetings of the Executive Committee, and the Secretary shall record the minutes of the meetings, also the Resident Council meeting minutes.

F. PLACE OF MEETINGS

Meetings of the Resident Council will be held at Acorn Acres main community building.

The Annual meeting of the Resident Council for the election of the Executive Committee, and transaction of other business shall be held at 1:30 P.M. on the fourth (4<sup>th</sup>) Thursday of September, or at the hour and date specified in the notice of the meeting, at Acorn Acres in the main community building.

G. REGULAR MEETINGS OF THE EXECUTIVE COMMITTEE

Regular meetings of the Executive Committee shall be held on the third (3<sup>rd</sup>) Wednesday of each month, the time set at the discretion of the Executive Committee, or if a holiday or other schedule interruption, on a date to be determined by the President and/or remaining members of the Executive Committee.

H. Special meetings of the Executive Committee may be called by the President or by three (3) or more officers who notify the President with specific agenda items.

I. NOTICE

Written notification or verbal notification, stating the place, day, hours of a special meeting, and the purpose for which the meeting is called shall be made to each officer at least twenty-four (24) hours prior to the meeting. No notice shall be required for annual or regular meetings except in the event of a change in the time, date, or location of the meeting.

J. QUORUM

A quorum is considered to be at least three (3) or more members of the Executive Committee. If a quorum is not present at any meeting of the Executive Committee the officers present may adjourn the meeting until a quorum shall be present. An affirmative vote of a majority of the members of the entire committee shall be required for any action of the Executive Committee.

K. VOTE

All matters shall be decided by the vote of a majority of the Executive Committee present at the meeting at which a quorum is present.

L. PROXIES

Members of the Executive Committee may vote in person, or by proxy executed in writing by the President. Proxies are good only for specific items(s) on agenda that require action.

M. ACTION BY CONSENT.

Any action required or permitted to be taken at any meeting of the Executive Committee may be taken without a meeting if a written consent to such action is signed by all the members of the Executive Committee and such written consent is filed with the minutes of the proceedings of the Executive Committee.

#### **IV -COMMITTEES**

A. EXECUTIVE COMMITTEE

The Resident Council may authorize the Executive Committee to manage the affairs of the Resident Council when action needs to be taken prior to regular/or in place of regular meetings of the Executive Committee. The Executive Committee consists of the President, Vice-President, Secretary, Treasurer and an alternate. Each officer of the Executive Committee shall continue to be an officer for a term of one (1) year or until earlier resignation, or unless removed sooner as an officer.

B. OTHER COMMITTEES

The Executive Committee and/or President may appoint such committee or committees, as it deems advisable and with such function and duties as the Executive Committee shall prescribe. The following list is for suggestions only. Some may be deleted or and other may be added as is appropriate for the well-being of the residents who live at Acorn Acres.

1. Welcoming
2. Social - cards, flowers for the sick, games, parties
3. Special activity for the birthday people of each month.
4. Caring for flowers, planting, watering, etc.
5. Volunteers to assist handicapped in cleaning, windows, etc.
6. Spiritual - if someone is sick and wants prayer.

C. VACANCIES

The Executive Committee shall have the power to fill vacancies in any of the above committees.



## ARTICLE V - OFFICERS

### A. OFFICERS

The officers of the Executive Committee shall be President, Vice-President, Treasurer, Secretary, Alternate and such other officers as may be elected or appointed. Officers whose authority and duties are not prescribed in these by-laws shall have such powers and duties as generally pertain to their respective offices. Any actions of the Executive Committee must be reported to the Resident Council.

### B. TERM OF OFFICE; RMOVAL

The Resident Council at the annual meeting shall elect a President, Vice-President, Secretary, Treasurer, and an Alternate . The officers of the Executive shall hold office for one (1) year term a until a successors are chosen and shall qualify. At any time by the affirmative vote of a majority of the Executive Committee then in office, when. in their judgment the best interest of the Resident Council will be served thereby, reasons for removal will be stated and, if possible, clearly documented. Such removal shall not prejudice the contract rights, if any, of the person so removed. Any vacancy occurring in any office of the Executive Committee may be filled for the unexpired portion of the term by the Executive Committee.

### C. THE PRESIDENT

The President shall be the principal executive officer of the Executive Committee. He or she shall be in charge of the business affairs of the Executive Committee. He or she shall see that the resolutions and directives of the Executive Committee are carried into effect except in those instances in which that responsibility is assigned to some other person by the Executive Committee; and in general, he or she shall discharge all duties incident to the office of President and such other duties as may be prescribed by the Executive Committee. The President will act as spokesperson for the Resident Council. He or she shall preside at all meetings of the Executive Committee. Except in those instances in which the authority to execute is expressly delegated to another officer.

### D. THE VICE-PRESIDENT

The Vice-President shall assist the President in the discharge of his or her duties as the President may direct and shall perform all other duties as from time to time may be assigned to him or her by the President or the Executive Committee. In the absence of the President or in the event of his or her inability or refusal to act, the Vice-President shall perform the duties of the President; and when so acting shall have all the powers of and be subject to all the restrictions upon the President. Except in those instances in which the authority to execute is expressly delegated to another officer of the Executive Committee.

E. THE SECRETARY

The Secretary shall give or cause to be given, notice of special meetings of the Executive Committee and the Resident Council. She/he shall keep the minutes of the meetings. She/he shall also see that the meeting record books, reports and any other documents that need to be properly kept, and filed. She/he shall perform such other duties as may be assigned to her/him from time to time by the President. She/he will assure that all residents will have access to the minutes when they pay their rent.

F. THE TREASURER

The Treasurer shall have the custody of the Resident Council funds and other valuable effects, shall keep full and accurate accounts of receipts and disbursements in books belonging to the Executive committee, and shall deposit all moneys and other valuable effects in the name and to the credit of the Resident Council in such depositories as may be designated by the Executive Committee. She/he shall disburse the funds of the Resident Council, working in close cooperation with the President, as may be ordered by the Committee, and shall render to the President, whenever she/he may require it, an account of all her/his transactions as Treasurer of the financial conditions of the Resident Council. At all Resident meetings and Executive Committee meetings, financial reports will be made by the Treasurer.

G. THE ASSISTANT SECRETARY OR ALTERNATE

The Assistant Secretary or Alternate, if any, shall, in the absence of the Secretary, or in the event of his/her disability, perform the duties and exercise the powers of the Secretary and shall perform such other duties and such other powers as may from time to time be designated by the President or the Executive Committee.

## **ARTICIE VI - RESIDENT COUNCIL FINANCES**

A. DEPOSIT OF FUNDS

All funds of the Resident Council shall be deposited in a bank chosen by the Executive committee.

B. CHECKS, ETC.

All checks shall be signed by the President and the Treasurer.

C. CONFLICT OF INTEREST

No officer of the Executive Committee shall be interested, directly or indirectly in any contracts relating to the operation conducted by it, nor in any contract for furnishing services or supplies to it, unless such contract shall be authorized by the members of the Executive Committee.

## **ARTICLE VII - FISCAL YEAR**

### **A. FISCAL YEAR**

The fiscal year of the Resident Council shall be from October 1 to September 30 of each year.

## **ARTICLE VIII - AMENDMENTS**

### **A. Amendments**

The Executive Committee shall have the power to make, alter and repeal these by-laws, and to adopt new by-laws, by an affirmative vote of a majority of the entire Resident Council, provided that such notice of the proposal to make, alter, or repeal these by-laws, or to adopt new by-laws was included in the notice of the meeting of the Executive Committee at which such action takes place.